

DECLARATION FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled **Coupling Device for Medical Lines** is described and claimed in

- ☐ the attached specification.
- ☒ the specification in application 10/564,113, filed on January 10, 2006 and amended on _____ (if applicable).
- ☒ international (PCT) application No. PCT/CA2004/000960, filed on June 28, 2004 and as amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is known to be material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56.

Foreign Application(s) and/or Claim of Foreign Priority

I hereby claim foreign priority benefits under Title 35, United States Code Section 119 of any foreign application(s) for patent or inventor(s) certificate listed below and have also identified below any foreign application for patent or inventor(s) certificate having a filing date before that of the application on which priority is claimed:

COUNTRY	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119
			YES: _____ NO: _____

Provisional Application

I hereby claim the benefit under Title 35, United States Code Section 119(e) of any United States provisional application(s) listed below:

APPLICATION SERIAL NUMBER	FILING DATE
60/514,615	October 28, 2003

U.S. Priority Claim

I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

APPLICATION SERIAL NUMBER	FILING DATE	STATUS(patented/pending/abandoned)
10/619,325	July 14, 2003	

Power of Attorney

I hereby appoint all attorneys associated with Customer Account No. 23598 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

James F. Boyle, Reg. No. 33,653	Timothy E. Newholm, Reg. No. 34,400
David D. Stein, Reg. No. 40,828	Michael J. Gratz, Reg. No. 39,693
Peter C. Stomma, Reg. No. 36,020	Andrew S. McConnell, Reg. No. 32,272
Mathew E. Corr, Reg. No. 45,434	Jay G. Durst, Reg. No. 41,723;
Mollie A. Newcomb, Reg. No. 50,915	William T. Kryger, Reg. No. 53,163
Adam L. Brookman, Reg. No. 32,401	

Address all telephone calls to: James F. Boyle at telephone number (414) 225-9755, facsimile number (414) 225-9753.

Address all correspondence to: The address associated with **Customer Account No. 23598**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor (given name, family name): David J. Coombs

Inventor's signature: _____

Residence: _____

Post Office Address: _____

Rimbey, Alberta, Canada

Box 1444

Rimbey, Alberta T0C2J0

Canada

Date: _____

Citizenship: Canadian

(signatures continue – if applicable)

U.S. Serial No. 10/564,113

Inventors: David J. Coombs and Bridget A. Wright

Title: *Coupling Device for Medical Lines*

Attorney Docket: 898.017

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Full name of second inventor (given name, family name): Bridget A. Wright

Inventor's signature: _____

Residence: _____

Post Office Address: _____

Rimbey, Alberta, Canada

Box 1230

Rimbey, Alberta T0C 2J0

Canada

Date: _____

Citizenship: Canadian